



# South Bethany

## Building Permit Application Packet

Please be aware that in order to apply for a Town of South Bethany building permit, you must complete and submit the following:

- ✓ **Town Building Permit application (attached):** please complete the fields that are highlighted yellow. Also, please be aware that a building permit will not be issued until you have obtained a valid Town Mercantile License;
- ✓ **Any accompanying documents (i.e., site plan, contracts with pricing, etc., depending on project)**
- ✓ **A copy of your Sussex County building permit (if applicable; inquire with the Town Code Enforcement Constable as to whether or not your project requires a County permit); and**
- ✓ **(If applicable) Subcontractor listing form** (attached - if you are applying for a project which will require a subcontractor)

**Please note:** The Town will only review complete application packets. After submitting all necessary documents to the Town Hall, the Town Code Enforcement Constable will review your application packet and, when done, will contact the applicant with the cost of the permit. Payment for the permit may only be accepted in person when the applicant picks up the permit during Town Hall business hours; payment in advance will not be permitted.

Any questions about your building permit or the process may be directed to the Town Code Enforcement Constable at 302-539-3653 ext. 102, or [inspector@southbethany.org](mailto:inspector@southbethany.org).



## *Town of South Bethany*

402 Evergreen Road

South Bethany, DE 19930

PH 302-539-3653 /

Fax: 302-539-7576

[inspector@southbethany.org](mailto:inspector@southbethany.org)

### Application For Building Permit

**Please note payment is only accepted in person when permit is ready for pick-up**  
**Permits will not be issued if you do not have a valid Town mercantile license.**

Date of Application: \_\_\_\_\_ Permit No. BP \_\_\_\_\_

Property Location: \_\_\_\_\_ PIDN: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Other Permits: DNRC Permit No. \_\_\_\_\_ Sussex County Permit No. \_\_\_\_\_

### Construction Job Information

New \_\_\_\_\_ Addition \_\_\_\_\_ Repairs \_\_\_\_\_ Renovation \_\_\_\_\_ Deck \_\_\_\_\_ Patio \_\_\_\_\_ Driveway \_\_\_\_\_ Demo \_\_\_\_\_

Other \_\_\_\_\_

Description of Work: \_\_\_\_\_

### Construction Cost / Value

Cost/Value of Proposed Construction: \_\_\_\_\_ **Note:** Signature of this document certifies that the cost information is true and correct and that it includes all cost items related to this work including labor, materials, demolition and supervision.

### Contractor Information

General Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Plans/Drawings provided: Yes\_\_\_\_ No \_\_\_\_ Survey/Site Plan Provided: Yes \_\_\_\_ No \_\_\_\_

Lot Area \_\_\_\_\_ Living Area \_\_\_\_\_ Non-Living Area \_\_\_\_\_

Floor Area \_\_\_\_\_ Living Area Ratio \_\_\_\_\_ 60% max. Floor Area Ratio \_\_\_\_\_ 71% max.

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Sides \_\_\_\_\_ Flood Zone \_\_\_\_\_

Footings: Poured Concrete \_\_\_\_\_ Pilings \_\_\_\_\_ Roof Pitch \_\_\_\_\_ No. of Bathrooms \_\_\_\_\_

**A Certificate of Compliance / Occupancy is required:** Yes \_\_\_\_\_ No \_\_\_\_\_

**An Elevation Certificate and Final As-built Survey is required prior to issuance of Certificate of Compliance / Occupancy:** Yes \_\_\_\_\_ No \_\_\_\_\_

#### **Applicants Certification**

I hereby certify that I am the owner of record of the named property, or that I have been authorized by the owner of record to make this application as authorized agent and that I assume the responsibility for the establishment of official property lines and required setbacks prior to start of construction, and agree to conform to all applicable codes and laws of this jurisdiction. I further certify that this information is true and correct to the best of my knowledge.

Permit fee calculation: Based on min. fee: \_\_\_\_\_ Based on area: \_\_\_\_\_

**Permit Fee:** \$ \_\_\_\_\_ **Paid by:** Check: No. \_\_\_\_\_ Cash: \$ \_\_\_\_\_

**Applicants Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mercantile License # \_\_\_\_\_ **Note: A Mercantile License is required for all subcontractors.**

**Notice:** All sub-contractors are required to have a Mercantile License from the Town.

**Any changes to the work described herein for which this permit is issued requires additional review and evaluation.**

Work hours are Monday to Friday, from 8:00 am to 6:00 pm, from May 15 until September 15. No construction on Saturdays, Sundays or National Holidays during this period. Construction on Saturdays is permitted from September 15 until May 15.



Town of South Bethany  
402 Evergreen Road  
South Bethany, DE 19930  
(302) 539-3653  
[www.southbethany.delaware.gov](http://www.southbethany.delaware.gov)

## Subcontractor Listing Form

**PLEASE NOTE:** If applicable, you must list below every subcontractor doing work on the South Bethany project for which your company is applying to get permitted to complete. This form must be completed and submitted along with the Town Building Permit Application (attached) before any permit may be issued, unless given permission from the Town Code Enforcement Constable or designee. If any subcontractor does not have a Town mercantile/business license, per Town Code § 145-68(C), they must first obtain a Town license before a permit is issued for the accompanying project.

Any contractor or subcontractor discovered working in the Town of South Bethany who failed to obtain a Town mercantile license, per Town Code § 84-10, will be subject to instant cease and desist of on-site operations as well as possible fines, starting at \$500. Any questions may be directed to the Town Code Enforcement Constable at 302-539-3653 ext. 102 or [inspector@southbethany.org](mailto:inspector@southbethany.org).

Builder/Contractor \_\_\_\_\_

Property Owner/Address \_\_\_\_\_

Tax-Map-Parcel No.: \_\_\_\_\_ Contractor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Provide the appropriate name of subcontractors:

Town Licensed	Town Licensed
Surveyor _____ <input type="checkbox"/>	Siding Installer _____ <input type="checkbox"/>
Excavator _____ <input type="checkbox"/>	Drywall Installer _____ <input type="checkbox"/>
Masonry _____ <input type="checkbox"/>	Painting _____ <input type="checkbox"/>
Pilings _____ <input type="checkbox"/>	Trim Carpenter _____ <input type="checkbox"/>
Carpentry _____ <input type="checkbox"/>	Carpet/Vinyl Installer _____ <input type="checkbox"/>
Crane Co. _____ <input type="checkbox"/>	Hardwood floor installer _____ <input type="checkbox"/>
Roofing Installer _____ <input type="checkbox"/>	Ceramic tile/Marble Installer _____ <input type="checkbox"/>
Plumber _____ <input type="checkbox"/>	Driveway Installer _____ <input type="checkbox"/>
HVAC _____ <input type="checkbox"/>	Well Driller _____ <input type="checkbox"/>
Electrician _____ <input type="checkbox"/>	Trash Service _____ <input type="checkbox"/>
Security Alarm Co. _____ <input type="checkbox"/>	Port-a-Potty Svc. _____ <input type="checkbox"/>
Fireplace _____ <input type="checkbox"/>	Other _____ <input type="checkbox"/>
Insulation _____ <input type="checkbox"/>	Other _____ <input type="checkbox"/>

**By signing this form, I am verifying that each subcontractor has obtained a valid Town mercantile license. I understand that if any subcontractor found on my job site has not obtained a valid mercantile license, the job will immediately be shut down.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE:** § 84-7 Display of license. Each license certificate shall be conspicuously displayed on the licensed premises and/or vehicle or shall be carried upon the person of the licensee.